Approved for use through 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/748,823			Filing Date 12/29/2003		To be Mailed
APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY													
FOR NUMBER FILED					NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A			Ά		N/A				N/A	·
	SEARCH FEE (37 CFR 1.16(k), (i), (i		N/A		N/	Ά		N/A	I			N/A	
	EXAMINATION FE (37 CFR 1.16(o). (p).		N/A		N/A			N/A		.,.,		N/A	
	TAL CLAIMS CFR 1.18(i))		minus 20 =		•			xs =	=		OR	x s =	
	DEPENDENT CLAIM CFR 1.16(h))			nus 3 = •	•			X \$ =				x s =	
	APPLICATION SIZE (37 CFR 1.18(s))	FEE shee is \$2 addi	If the specification and drawing sheets of paper, the application is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 (te fee due each reof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									4				1
* If the difference in column 1 is less than zero, enter *0* in column 2.								TOTAL	L			TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									ALL I		ER THAN ALL ENTITY		
AMENDMENT	04/06/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR		PRESENT EXTRA		RATE (\$		ADDITIONAL EE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	- 30	Minus	·· 31	=	0		x s =	=		OR	X \$50=	0
	Independent (37 CFR 1,18(h))	• 7	Minus	•••7	-	0	1	xs :	= [OR	X \$200=	0
	Application Size Fee (37 CFR 1.16(s))												
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							1			OR		
											OR	TOTAL ADD'L FEE	0
L		(Column 1)		(Column 2		Column 3)	_						
AMENDMENT	Coloin	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEF PREVIOUS PAID FO	R I SLY	PRESENT		RATE (\$		ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR	. 11	Minus	31	=			x \$	-	. /	OR	x \$ =	,
	Independent (37 CFR 1.16(h))	. /	Minus	7	=	1	1	x s	= 1	/	OR	x s =	
	Application Size Fee (37 CFR 1.16(s))						1		T	7			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								T	/	OR		
											OR	TOTAL ADD'L FEE	/
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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